mendment

EMPLOYEE POST-TRAVEL DISCLOSURE FORM

2017 MAR 10 PM 1: 37

This form is for disclosing the receipt of travel expenses from private sources for travel taken in connection with official duties. This form does not eliminate the need to report privately-funded travel on the annual Financial Connection with Disclosure Statements of those employees required to file them. In accordance with House Rule 25, clause 5, you must complete this form and file it with the Clerk of the House, 135 Cannon House Office Building, within 15 days after travel is completed. Please do not file this form with the Committee on Ethics.

NOTE: Willful or knowing misrepresentations on this form may be subject to criminal prosecution pursuant to 18 U.S.C. § 1001.

1.	. Name of Traveler: Nicholas Uehlecke	
2.	2. a. Name of accompanying relative: b. Relationship to Traveler: Spouse Child Other (specify):	<u>or</u> None ■
3.	a. Dates of departure and return: Departure: Return:	
	b. Dates at personal expense (if any):	<u>or</u> None □
4.	Departure city: Washington, DC Destination: Orlando, FL Return	city: Washington, DC
5.	. Sponsor(s) (who paid for the trip): Healthcare Information and Management Syste	ms Society (HIMSS)
6.		
	meetings with industry and provider groups relevant to	my portfolio
7.	. Attached to this form are EACH of the following (<i>signify that each item is attac corresponding box</i>):	ched by checking the
	a. a completed Sponsor Post-Travel Disclosure Form;	
	b. the Primary Trip Sponsor Form completed by the trip sponsor prior to tattachments and Grantmaking or Non-Grantmaking Sponsor Forms;	he trip, including all
	c. page 2 of the completed Traveler Form submitted by the employee; and	
	d. the letter from the Committee on Ethics approving my participation on the	is trip.
8.	 a. I represent that I participated in each of the activities reflected in the attache (Signify that statement is true by checking box): b. If not, explain: 	ed sponsor's agenda.
I c kno	certify that the information contained on this form is true, complete, and correct nowledge.	_
SIC	IGNATURE OF TRAVELER: DAT	$_{\rm E:}$ 03.07.17
Spo em	authorized this travel in advance. I have determined that all of the expenses lipponsor Post-Travel Disclosure form were necessary and that the travel was in imployee's official duties and would not create the appearance that the employee is or private gain.	connection with the
	IAME OF SUPERVISING MEMBER: Kevin Brady DAT	_{E:} 03.07.17
	IGNATURE OF SUPERVISING MEMBER: Persion date 2/2015 by Committee on Ethics	

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LJ	Original	☐ Amendment	

SPONSOR POST-TRAVEL DISCLOSURE FORM

This form must be completed by an officer of any organization that served as the primary trip sponsor in providing travel expenses or reimbursement for travel expenses to House Members, officers, or employees under House Rule 25, clause 5. A completed copy of the form must be provided to each House Member, officer, or employee who participated on the trip within 10 days of their return. You must answer all questions, and check all boxes, on this form for your submission to comply with House rules and the Committee's travel regulations. Failure to comply with this requirement may result in the denial of future requests to sponsor trips and/or subject the current traveler to disciplinary action or a requirement to repay the trip expenses.

NOTE: Willful or knowing misrepresentations on this form may be subject to criminal prosecution pursuant to 18 U.S.C. § 1001.

1.	Sponsor(s) (who	onsor(s) (who paid for the trip):			
	Healthcare Information and Management Systems Society (HIMSS)				
2.	Travel Destinati	ion(s): Orlando,	FL		
3.	Date of Departu	re: February 1	9, 2017	Date of	of Return: February 22, 2017
4.	Name(s) of Trav	veler(s): Nick U	ehlecke		
				form only if all	ll information is identical for each person listed.)
5.	Actual amount	of expenses paid	on behalf of, or	reimbursed to,	each individual named in response to Question 4:
		Total	Total <i>Lodging</i>	Total Meal	Other Expenses
		Transportation Expenses	Expenses	Expenses	(dollar amount per item and description)
	Traveler	\$505.40	\$348	\$185	\$785 Registration Fee
	Accompanying Relative	n/a	n/a	n/a	
6.		nnected to the tripe by checking box)		l costs incurred	d and not a per diem or lump sum payment. (Signify
•	I certify that the information contained in this form is true, complete, and correct to the best of my knowledge. Signature:				
		M. Smith			Title: Executive Vice President
	Tiunic.				Title: Excounte vice i resident
	Organization: HIMSS I am an officer of the above-named organization (signify statement is true by checking box):				
					ment is true by thething boxy:
	Address: 33 West Monroe Street, Suite 1700 Chicago, IL 60606-5616				
		_{oer:} 734-604-62		v	
	Email Address:	csmith@hims			
	Eman Address:			one named in I	ideal if additional information
	Committee staff may contact the above-named individual if additional information is required. If you have questions regarding your completion of this form, please contact the Committee on Ethics at (202) 225-7103.				

Version date 2/2013 by Committee on Ethics

TRAVELER FORM

1.	Name of Traveler: Nicholas Uehlecke
2.	Sponsor(s) (who will be paying for the trip): Healthcare Information and Management Systems Society (HIMSS)
3.	Travel destination(s): Orlando, FL
4.	 a. Date of departure 02.19.2017 Date of return: 02.22.2017 b. Will you be extending the trip at your personal expense? ☐ Yes ■ No If yes, dates at personal expense:
5.	 a. Will you be accompanied by a relative at the sponsor's expense? ☐ Yes b. If yes: (1) Name of accompanying relative:
	(2) Relationship to traveler: \square Spouse \square Child \square Other (specify):
	(3) Accompanying relative is at least 18 years of age:
6.	 a. Did the trip sponsor answer "yes" to Question 9(d) on the Primary Trip Sponsor Form (i.e., travel is sponsored by an entity that employs a registered federal lobbyist or foreign agent and you are requesting lodging for two nights)? ☐ Yes ☐ No b. If yes, explain why the second night of lodging is warranted:
7.	Primary Trip Sponsor Form is attached, including agenda, invitee list, and any other attachments and contributing sponsor forms: Yes No Note: The agenda should show the traveler's individual schedule, including departure and arrival times and identify the specific events in which the traveler will be participating.
8.	Explain why participation in the trip is connected to the traveler's <u>individual</u> official or representational duties. Staff should include their job title and how the activities on the itinerary relate to their duties.
	As Professional Staff for the Ways and Means Committee's Subcommittee on Health, the issues discussed at the conference fall within the Committee's jurisdiction and within my policy portfolio.
9.	Is the traveler aware of any registered federal lobbyists or foreign agents involved in planning, organizing, requesting, and/or arranging the trip? Yes No
10.	FOR STAFF TRAVELERS: TO BE COMPLETED BY YOUR EMPLOYING MEMBER:
	ADVANCED AUTHORIZATION OF EMPLOYEE TRAVEL
	I hereby authorize the individual named above, an employee of the U.S. House of Representatives who works under my direct supervision, to accept expenses for the trip described in this request. I have determined that the above-described travel is in connection with my employee's official duties and that acceptance of these expenses will not create the appearance that the employee is using public office for private gain. Date: 01.06.2017
	Signature of Employing Member

PRIMARY TRIP SPONSOR FORM

This form should be completed by private entities offering to provide travel or reimbursement for travel to House Members, officers, or employees under House Rule 25, clause 5. A completed copy of the form (and any attachments) should be provided to each invited House Member, officer, or employee, who will then forward it to the Committee together with a Traveler Form at least 30 days before the start date of the trip. The trip sponsor should NOT submit the form directly to the Committee. The Committee Web site (ethics.house.gov) provides detailed instructions for filling out the form.

NOTE: Willful or knowing misrepresentations on this form may be subject to criminal prosecution pursuant to 18 U.S.C. § 1001. Failure to comply with the Committee's Travel Regulations may also lead to the denial of permission to sponsor future trips.

1.	1 (
	Healthcare Information and Management Systems Society (HIMSS)
2.	I represent that the trip will not be financed (in whole or in part) by a registered federal lobbyist or foreign agent (signify that the statement is true by checking box):
3.	 Check only one: I represent that: a. the primary trip sponsor has not accepted from any other source funds intended directly or indirectly to finance any aspect of the trip or b. the trip is arranged without regard to congressional participation and the primary trip sponsor has accepted funds only from entities that will receive a tangible benefit in exchange for those funds or c. the primary trip sponsor has accepted funds from other source(s) intended directly or indirectly to finance all or part of this trip and has enclosed disclosure forms from each of those entities. If "c" is checked, list the names of the additional sponsors:
4.	Provide names and titles of ALL House Members <u>and</u> employees you are inviting. For each House invitee, provide an explanation of why the individual was invited (include additional pages if necessary): Please see the attached list for Congressional invites.
5.	Is travel being offered to an accompanying relative of the House invitee(s)? Yes No
5.	Date of departure: February 19, 2017 Date of return: February 23, 2017 (see attached for more information)
7.	a. City of departure: Washington, DC
	b. Destination(s): Orlando, FL
	c. City of return: Washington, DC
3.	I represent that (check one of the following):
	a. The sponsor of the trip is an institution of higher education within the meaning of section 101 of the Higher Education Act of 1965: \square or
	 b. The sponsor of the trip does not retain or employ a registered federal lobbyist or foreign agent: or c. The sponsor employs or retains a registered federal lobbyist or foreign agent, but the trip is for attendance at
	a one-day event and lobbyist/foreign agent involvement in planning, organizing, requesting, or arranging the trip was de minimis under the Committee's travel regulations.
€.	a one-day event and lobbyist/foreign agent involvement in planning, organizing, requesting, or arranging the
).	a one-day event and lobbyist/foreign agent involvement in planning, organizing, requesting, or arranging the trip was de minimis under the Committee's travel regulations. Check one of the following: a. I checked 8(a) or (b) above:
€.	 a one-day event and lobbyist/foreign agent involvement in planning, organizing, requesting, or arranging the trip was de minimis under the Committee's travel regulations. □ Check one of the following: a. I checked 8(a) or (b) above: ■ b. I checked 8(c) above but am not offering any lodging: □
Э.	 a one-day event and lobbyist/foreign agent involvement in planning, organizing, requesting, or arranging the trip was de minimis under the Committee's travel regulations. □ Check one of the following: a. I checked 8(a) or (b) above: ■ b. I checked 8(c) above but am not offering any lodging: □ c. I checked 8(c) above and am offering lodging and meals for one night: □ or
).	 a one-day event and lobbyist/foreign agent involvement in planning, organizing, requesting, or arranging the trip was de minimis under the Committee's travel regulations. □ Check one of the following: a. I checked 8(a) or (b) above: ■ b. I checked 8(c) above but am not offering any lodging: □

10.	Attached is a detailed agen an hourly description of pla	nda of the activities the anned activities for trip	e House invitees will be pa o invitees) (indicate agenda	articipating in duri a is attached by ch	ng the travel (i.e., ecking box):
11.	Check one: a. I represent that a regiment of the control of the c	ment of the trip (signif	y that the statement is true	not accompany Hoby checking box):	ouse Members or
12.	For each sponsor required trip and its role in organizing HIMSS is a cause-based technology (IT). HIMSS and market research, are of healthcare through IT non-profit partners. HIMS aspects of the trip and cand panel topics.	ng and/or conducting to d not-for-profit organ provides thought lea nd leads efforts to im . HIMSS represents SS is responsible for	the trip: lization focused on better lidership, community build prove the quality, cost-or 64,000 members, 640 co r the development, organ	r health through i ding, professiona ffectiveness, acc orporate member nization and cond	nformation al development, ess, and value rs, and 450
13.	Answer parts a and b. Answer	·			
	a. Mode of travel: Air	Rail 🗆 Bus 🗏	Car ☐ Other ☐ (Spec	cify:)
	b. Class of travel: Coach	Business 🗆 F	irst Charter Other	r 🗆 (Specify:)
	c. If travel will be first cla	ass or by chartered or p	private aircraft, explain why	y such travel is wa	rranted:
15.	event attendees: e <u>or</u> b. The trip involves events If "b" is checked:	invitee(s). (signify the k one of the following) ent that is arranged or congressional participe that are arranged specay of meals (approximate)	at the statement is true by a : organized without regard eants are similar to those parts ifically with regard to cong mate cost may be provided):	to congressional provided to or pu	participation and rchased by other ation:
	Hotel name: Rosen Cent	do HIMSS seeks bids from local hot re Hotel	0.1	Cost per night: in of price, location, and ac Cost per night:	\$116
	Hotel name:		City:	Cost per night:	
	Reason(s) for selecting:				

- 17. I represent that all expenses connected to the trip will be for actual costs incurred and not a per diem or lump sum payment. (signify that the statement is true by checking box):
- 18. TOTAL EXPENSES FOR EACH PARTICIPANT:

☐ actual amounts ☐ good faith estimates	Total Transportation Expenses per Participant	Total Lodging Expenses per Participant	Total Meal Expenses per Participant
For each Member, Officer, or employee	\$350	\$375	\$185
For each accompanying relative	n/a	n/a	n/a

	Other Expenses (dollar amount per item)	Identify Specific Nature of "Other" Expenses (e.g., taxi, parking, registration fee, etc.)
For each Member, Officer, or employee	\$785	Registration fee
For each accompanying relative		

NOTE: Willful or knowing misrepresentations on this form may be subject to criminal prosecution pursuant to 18 U.S.C. § 1001.

10	Check	000

- a. I certify that I am an officer of the organization listed below. \blacksquare or
- b. N/A sponsor is an individual or a U.S. institution of higher education.
- 20. I certify that I am not a registered federal lobbyist or foreign agent for any sponsor of this trip.
- 21. I certify by my signature that the information contained in this form is true, complete, and correct to the best of my knowledge.

Signature:

Name: Carla M. Smith

Title: Executive Vice President

Organization: HIMSS

Address: 33 West Monroe Street, Suite 1700, Chicago, IL 60606-5616

Telephone number: 734-604-6275

Email address: csmith@himss.org

If there are any questions regarding this form please contact the Committee at the following address:

Committee on Ethics U.S. House of Representatives 1015 Longworth House Office Building Washington, DC 20515 (202) 225-7103 (phone) (202) 225-7392 (general fax)

U.S. House of Representatives

COMMITTEE ON ETHICS

Chashington, DC 20515

February 16, 2017

Mr. Nicholas Uehlecke Office of the Honorable Kevin Brady 1104 Longworth House Office Building Washington, DC 20515

Dear Mr. Uehlecke:

Pursuant to House Rule 25, clause 5(d)(2), the Committee on Ethics hereby approves your proposed trip to Orlando, Florida, scheduled for February 19 to 22, 2017, sponsored by the Healthcare Information and Management Systems Society (HIMSS).

You must complete an Employee Post-Travel Disclosure Form (which your employing Member must also sign) and file it, together with a Sponsor Post-Travel Disclosure Form completed by the trip sponsor, with the Clerk of the House within 15 days after your return from travel. As part of that filing, you are also required to attach a copy of this letter and both the Traveler and Primary Trip Sponsor Forms (including attachments) you previously submitted to the Committee in seeking pre-approval for this trip. If you are required to file an annual Financial Disclosure Statement, you must also report all travel expenses totaling more than \$390 from a single source on the "Travel" schedule of your annual Financial Disclosure Statement covering this calendar year. Finally, Travel Regulation § 404(d) also requires you to keep a copy of all request forms and supporting information provided to the Committee for three subsequent Congresses from the date of travel.

If you have any further questions, please contact the Committee's Office of Advice and Education at extension 5-7103.

Sincerely,

Susan W. Brooks Chairwoman

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Theodore E. Deutch Ranking Member

SWB/TED:re



Congressional Staff Agenda
Location: Orange County Convention Center, Orlando, FL
February 19 – 23, 2017
Access Full Conference Information here: HIMSS17
All activities are at Orange County Convention Center unless otherwise noted.
All times are Eastern Time (EST).

Sunday February 19, 2017

Sunday, February 19, 2017					
Travel to Orlande					
12:00 – 8:00 pm	Conference Registration and Badge Pick-up				
	Location: Orange County Convention Center, Orlando, FL or Orlando Intl Airport				
8:00 AM –	Preconference Symposia:				
4:30PM					
	Location: Orange County Convention Center				
	Business of healthcare symposium: succeeding in a value-based world				
	The transition from fee-for-service to pay-for-value payment models is one of				
	the greatest financial challenges the U.S. healthcare system faces. Despite a willingness to embrace these new payment models, few provider				
	organizations are administratively prepared to do so. Join us to learn what				
	administrative infrastructure issues your organization should be prepared to				
	address when moving to an alternative payment model, and how early				
	adopters are mitigating the challenges presented with these changes.				
	OR				
	Cybersecurity Forum				
	Many healthcare organizations have significantly evolved their cybersecurity				
	programs to keep up with attacks and compromises from internal and external				
	threat actors. This forum will explore lessons learned, current challenges, and				
	the road ahead in the cybersecurity journey. Healthcare providers, business				
	associates, vendors and others will share their experiences and insight by				
	providing practical information that healthcare organizations can use to gauge				
	and improve their security postures.				
	OR				
	Innovation Symposium				
	Getting ready to innovate and compete in the new healthcare economy? Join				
	healthcare leaders in a progressive journey through the continuum of care as				
	they demonstrate IT-enabled innovations powering new models of care				
	delivery. Learn from experts about the business and technical context of				
	these innovations, IT imperatives, key frameworks and actionable examples,				
	and gain inside knowledge of how to stay ahead in the consumer-focused, value-oriented healthcare economy.				
	value enemied realiticale economy.				
	OR				
	Interenerability and HIE Symposium Interenerability and He-14				
	Interoperability and HIE Symposium: Interoperability and Health Information Exchange - Making it Work				
	Continued adoption of value-based payment models, implementation of a				

growing number of health IT applications across care settings, evolution of available technical standards, and attention from federal policymakers all underscore and align the need for semantic interoperability and exchange of data, information and knowledge across the health system. Explore the opportunities and challenges affecting diverse stakeholders stemming from a confluence of new policies, evolving standards and certification programs, applications, and coordination required to realize a learning health system that is patient-centered and improves population health.

OR

Medical Device Security Symposium: Medical Device Security Information Sharing - Clarity for Action

Medical device security is now recognized as a major public health problem. Examine the critical functions of the recently launched medical device Information Sharing and Analysis Organization (ISAO) initiative co-led by NHISAC and MDISS. Uncover the potential transformative impact of the open and collaborative ISAO on patient safety and privacy, health system and manufacturer cybersecurity operations, and opportunities for stakeholder participation. Key device cybersecurity updates will be provided.

OR

Nursing Informatics Symposium: Harnessing Disruptive Innovation Explore the evolving role of informatics nurses, and learn how disruptive innovation can be used to address current and future challenges. Examine the benefits of disruptive leadership, learn how to apply innovation and state-of-the-art interoperability, and glimpse the future of clinical decision making and patient-generated data.

OR

Population Care Management Symposium: Clinical & Business Intelligence Road to Value-Based Care Success

Healthcare is at the crossroads of a volume-based and value-based system. Making the transition will require changes in people, processes and technology. Learn how clinical & business intelligence and data strategies can be applied to support the challenges of population health management and its role in transforming healthcare to meet the requirements of value-based payment structures and other emerging health management needs.

OR

Precision Medicine Symposium: Precision Medicine IT Solutions - Driving Clinical Quality and Value

Precision medicine promises to improve patient care by targeting therapies to a patient's molecular profile. Major health systems are implementing enterprise-wide precision medicine programs, but they face IT challenges – namely, the lack of structured molecular data aggregated with a patient's longitudinal clinical history, and difficulties capturing structured patient outcomes. Discover the value of precision medicine to the health system and the IT solutions needed to make precision medicine a routine part of patient care.

OR

Quality Symposium: Meeting Performance Thresholds in a MIPS/Payment for Value World

	The Medicare Access and CHIP Reauthorization Act escalates CMS's efforts to move the traditional fee-for-service reimbursement model to a payment-for-value one via the Quality Payment Program (QPP). Explore the quality reporting and performance thresholds for the QPP, and uncover proven strategies for leveraging health IT to risk-adjust and more effectively treat patients and manage chronic conditions to meet CMS performance thresholds.
11:30 am –	First Timers Orientation
12:30 PM	
	Are you a first-time conference attendee, or have you attended in the past but
	could use a refresher? Attend this on-site orientation session for HIMSS17!
5:00 – 7:00 PM	HIMSS17 Opening Reception
7:00 – 9:00 PM	Come celebrate to kick off our conference! Network your way through an evening with live music, food, libations, and friendly conversation. Connect with industry leaders and colleagues alike at this special event open to all registered HIMSS17 conference attendees. This is a widely attended event.
7.00 - 9.00 PM	HIMSS17 Public Policy Leaders Dinner
	<u>Location:</u> TBD
	<u>Description:</u> Join policy leaders within HIMSS, as well as state and federal officials, for dinner to discuss policy matters including the health IT policy, legislative, and regulatory landscape in Washington, DC and the states. <i>This is a widely attended event.</i>

Monday, February 20th, 2017

	uary 20, 2017
Alternative Travel to Orlando	
(Alternative to Sunday travel)	
7:00AM -	Conference Registration and Badge Pick-up
6:00PM	Location: Orange County Convention Center or Orlando Intl. Airport
8:30 – 10:00 AM	Keynote Speaker: Ginni M. Rometty, Chairman, President and CEO, IBM
	<u>Location:</u> Valencia Ballroom
10:00 AM - 6:00 PM	HIMSS17 Exhibition Hall
	<u>Location:</u> Orange County Convention Center
	Description: Learn about cutting edge health information technology. Experience thousands of health IT products and services on the HIMSS17 exhibit floor. Features the Meaningful Use Experience — a special live demonstration area that lets the viewer experience proven, certified EHR solutions. Also experience firsthand the Social Media Center, HIMSS Interoperability Showcase, The Intelligent Hospital Pavilion and more.
10:00 AM – 6:00 PM	Interoperability Showcase
	<u>Location:</u> Booth 9000 Hall F
	<u>Description:</u> Explore a health ecosystem where standards-based health IT enables individuals to securely access, contribute to and analyze their own health data.

10:00 -	Staff Led Tour of the HIMSS17 Exhibition Hall:
10:30 AM	Location: Orange County Convention Center
10:30	First Timers Conference Orientation
11:30 AM	Are you a first-time conference attendee, or have you attended in the past but could use a refresher? Attend this on-site orientation session for HIMSS17!
10:30 – 11:30 AM	Concurrent Education Sessions:
	Location: Orange County Convention Center
	How Healthcare and Other Industries Create Delightful Experiences The keynote panel for the HIMSS17 UX Forum brings together thought leaders from the healthcare and other complex, high-risk, and data-driven industries to explore how they have created delightful user experiences for all the stakeholders involved in the supply and demand of their products and services
	OR
	Health Information Technology – Enabling Joint Readiness This session will demonstrate how HIT is "delivering value" to the Military Health System (MHS) by implementing, managing, and sustaining an integrated and protected medical information enterprise that fulfills its mission. The session lays out the CIO's vision of how DHA HIT can enhance support to the MHS
	OR
	Data-Driven Medicine: Actionable Insights from Patient Data Successful population health and value-based care initiatives require complete and accurate information. Hear how efficient aggregation and normalization of community-wide health and care records, combined with systematically applied innovative clinical logic can improve patient safety, expose gaps in care and present providers with a complete view of relevant information about their patients,
	OR
	Emerging Impacts of Artificial Intelligence on Healthcare IT Advances in Artificial Intelligence (AI) and Machine Learning (ML) are having a profound impact on how insights are generated from healthcare data. Commercial efforts like IBM Watson and Google's TensorFlow application have enabled new possibilities for generating value from clinical big data.
	OR
	Hospital Admissions and Readmissions A road map on how to design, implement and sustain a successful Hospitalist Program. Insight into challenges, barriers that came along the way and what solutions were implemented to overcome those barriers. Adoption of CMS's the Triple Aim, which we found to be a great foundation on how to improve outcomes and how it played a large role in our Hospitalist program.
12:00 – 1:00 PM	Concurrent Education Sessions:
	Location: Orange County Convention Center

	Office of the National Coordinator for Health IT (ONC) Town Hall Join the Leadership Team from the Office of the National Coordinator for Health Information Technology (ONC) in an interactive session to learn more about the Office's ongoing work to advance the national health information technology (IT) agenda. ONC will engage the audience in an open dialog about our efforts to build health IT as the foundation for better care.
	OR
	Demanding a Delightful Care Team Experience Nothing can be more exhausting as change. For the last decade, the tools that care teams use track and administer care for patients have transformed radically. Care teams are beleaguered and fatigued by other technological, regulatory and market changes.
	OR
	MHS GENESIS: Transforming the Delivery of Healthcare MHS GENESIS, the MHS single electronic health record, recently deployed to its first initial deployment site, Fairchild AFB. This session highlights current deployment and change management activities as well as lessons learned. This enterprise wide electronic health record will roll out across the Military Health System using a wave deployment process.
	OR
	A Universal Operating Model for Population Health Management While the goals are clear, the mechanics of implementation and operations of "population health" are currently a work-in-progress across the healthcare ecosystem. This talk outlines a universal framework for a Triple Aim-based operating model of population heath management, derived from extensive experience (successes and failures) bringing principles of process design, program and operations.
	OR
	YourTurn: Bringing Precision Medicine to the Point of Care With Precision Medicine beginning to deliver on some of its promise, hurdles still remain. Viewing interpreted genomic data within the context of a patients clinical record is challenging enough, but how do we insert meaningful information into the existing workflow to inform a provider when a genetic test makes sense for their patient, and how do we make it easy to ingest the interpreted results.
1:30 – 2:30 PM	About HIMSS Session
4.00 0.00 514	Join us for an overview of how HIMSS globally transforms health and healthcare through the best use of IT by driving thought leadership, analytics, community and professional development. Whether a new HIMSS member or new to HIMSS conference, come and learn about the HIMSS vision of better health through information technology, how HIMSS educates, counsels and guides the healthcare sector and, by engaging all stakeholders in IT through leadership, improves health around the world.
1:30 – 2:30 PM	Concurrent Education Sessions:
	Location: Orange County Convention Center
	Prioritizing Care Coordination for Patients Who Need It Most

Medical Home Network (MHN) is a 501(c)3 that integrates disparate providers to create a seamless network upon which providers can effectively connect, communicate and collaborate around patient care for effective care coordination. MHN have improved value and outcomes with a team-based model of care, technology platform and success building provider-alignment has advanced the delivery of medical, behavioral and social services in one of the largest Medicaid settings in the country.

OR

Reducing Preventable Inpatient Deaths in Community Hospitals 2016 HIMSS Davies Award winner North York General Hospital engaged its clinicians in a carefully managed process to create a library of over 350 electronic order sets, during which evidence was carefully integrated into all clinical content and workflows. The result was broad and deep adoption, evidenced by a dramatic increase in order set use, and a corresponding significant decrease in the probability of inpatient death from pneumonia or exacerbation of chronic obstructive pulmonary disease (COPD).

OR

Emerging Infectious Diseases, Clinical Decision Support, and Electronic Health Records Meaningful Use

Under the Electronic Health Records (EHRs) Incentive Programs, the Centers for Medicare and Medicaid Services (CMS) has made payment incentives available for Medicare and Medicaid eligible providers and hospitals that purchase, implement, and use certified EHRs systems. This session will demonstrate how collaborative efforts between the Centers for Disease Control and Prevention (CDC) and Office of the National Coordinator for Health IT (ONC), and close partnerships with the healthcare and health information technology sectors, were instrumental in the development and deployment of critical clinical decision support tools to address the emerging public health threat of Zika virus.

OR

Demanding a Delightful Care Experience for Patients

According to Gallup, more than half of Americans asked have a somewhat or very negative view of the healthcare industry. Factors like a wait time, exam time, lack of price transparency, complicated bills and more all play a role in the overall patient experience. In a value-based reimbursement environment, patient populations with chronic disease care needs demand a radically different heath care experience than the one they are currently receiving.

3:00 - 4:00 PM

Concurrent Education Sessions:

Location: Orange County Convention Center

Engaging Executives and Boards in Cybersecurity

Following a series of high-profile breaches and resulting impact within and outside the healthcare industry, cybersecurity is increasingly a board-level issue and concern. Healthcare organizations are changing the way they look at cybersecurity and the impact it can have on organizations if not properly addressed.

OR

Mercy Clinical Pathways Improving Quality and Cost

	Mercy's heart failure pathway was fully implemented into the electronic health record with use of standardized order sets and clinical decision support triggers/criteria designed to facilitate specific patient outcomes. This pathway has shown improvements in quality, process and cost. Mortality has been reduced greater than 50%, diuretics are administered faster and direct variable cost per case is approximately \$800 less on average for patients on the heart failure pathway compared to patients not on the pathway.
	OR
	YourTurn: Data Quality and Integrity Poor data quality due to lack of systematic data quality management has broad organizational impact. The consequences range from disruptive or even dangerous breaks in care processes, to the impact on the health systems reputation. Yet the need to manage the quality and integrity of data is a continual process, not a one-and-done project. In this session, we'll discuss some of the ways to enhance data quality, including the need for an accurate Enterprise
4:30 – 6:00 PM	Exhibition Floor Social Hour
	Location: Exhibition Floor
5:30 - 6:30 PM	Communities Open House
	Location: Valencia Ballroom Foyer
	HIMSS membership include a broad range of professional roles. Take this in- person opportunity to build your peer network, and mingle with volunteers and leaders from HIMSS communities.
7:00 – 8:00 PM	Government Relations Reception
	Location: TBD
	<u>Description:</u> Reception with HIMSS public policy leaders, winners of the HIMSS Nichols E. Davies Award for Excellence in Health Information Technology, and the HIMSS Public Policy Committee.
	Dinner on your own

Tuesday, February 21st, 2017

7:00 - 8:15 AM	HIMSS Public Policy Leaders Breakfast
7.00 - 0.13 AW	Timos Tubic Folicy Leaders Breaklast
	Location: TBD
	Description: Breakfast with HIMSS public policy leaders, winners of the HIMSS
	Niebole E. Device Average for Everyland in Lath to form (** T.)
	Nichols E. Davies Award for Excellence in Health Information Technology, and the
	HIMSS Public Policy Committee.
8:30 – 9:30 AM	State Officials Session
	Location: 311E
	Description: This State session provides the opportunity to hear from key state
	officials about the health IT public policy topics that they are addressing as well as
	the issues where they seek more information and input from constituents and key
	industry stakeholders
10:00 - 11:00 AM	Congressional Forum
10.00 / 110	- Congressional Forum

	Location: Room 311 E
	<u>Description:</u> The Congressional Forum session provides the opportunity to hear from key Senate and House of Representatives staffers about the health IT public policy topics that they are addressing as well as the issues where they seek more information and input from constituents.
9:30 AM – 6:00 PM	HIMSS17 Exhibition Hall Location: Orange County Convention Center,
	<u>Description:</u> Learn about cutting edge health information technology. Experience thousands of health IT products and services on the HIMSS17 exhibit floor. Features the Meaningful Use Experience — a special live demonstration area that lets the viewer experience proven, certified EHR solutions. Also experience firsthand the Social Media Center, HIMSS Interoperability Showcase, The Intelligent Hospital Pavilion and much more.
9:30 AM — 6:00 PM	Interoperability Showcase
0.00 PW	Location: Booth 9000 Hall F
	<u>Description:</u> Explore a health ecosystem where standards-based health IT enables individuals to securely access, contribute to and analyze their own health data.
10:00 – 11:00 AM	Concurrent Education Sessions:
	Location: Orange County Convention Center
	Improving Clinician Mobility for Patient Care Delivery Clinicians are interested in the efficacy of using mobile devices. This presentation discusses findings from a pilot study aimed at achieving greater mobile flexibility and productivity in patient care. The innovation that was tested was an integrated set of wireless computing and docking technologies that automatically connects a mobile tablet computer to a mobile base station and other computer peripherals without the use of cables. We report on the benefits and challenges of the vendor agnostic solution framework, implementation process, and utilization for patient care.
	OR
	Importance of Narrative: Open Notes, Patient Stories, Human Connection This session will highlight the importance of preserving narrative and patient stories within the clinical encounter using a combination of stories, examples, and research to showcase how story amplifies the connection between patients and clinicians and improves care. We'll also examine the way that open notes impacts patients' perspective on their illness and their likelihood to take action around their health.
	OR
	Overcome Challenges/Obstacles to Achieving Interoperability Interoperability is getting due attention after most hospitals and providers achieved significant progress in meaningfully using EHR by coordinate care within and between care settings. The next step is to electronically communicate with providers delivering care for transient and local population at sub-acute, long-term care, home care, medical home and hospice environments across the continuum of care. This lecture covers the definitions, factors leading to selecting this topic, approaches used, desired vs. actual state outcomes and gaps, and formal structures (i.e. HIEs). It then expands to implementation steps, challenges from

	vendors, providers and patients and ways to overcome barriers, critical success factors, conclusions and outcomes, and recommendations to get the benefits of interoperability with an example.
11:00 - 12:00 AM	Staff Led VIP Tour of the Interoperability Showcase
	Location: Booth 9000 Hall F
11:30 AM – 12:30 PM	Concurrent Education Sessions:
12.30 FW	Location: Orange County Convention Center
	It Starts with an Idea: Making Innovation Happen What do you do with an idea? In your organization, a lot is riding on that question. The answer can have an immense impact on your ability to create a culture of innovation and turn an idea into reality. In this session, we explore how to recognize innovators inside your organization and gather game-changing ideas from them, how to evaluate these ideas from your innovators and assess their "fit" for your organization and how to construct a pathway for these ideas inside your organization.
	OR
	Renown Health's IT Transformation: A Model for Success Healthcare organizations are faced with lower budgets and increased demands for higher customer service. This session focuses on the multi-year strategic approach to revamping Renown's enterprise technology platform to transform patient care.
	OR
	Advancing HIT Care Coordination in Long-Term Care This session will illustrate how health information exchange improved care coordination between long-term and post-acute providers and hospitals
	OR
	YourTurn: Creating Longitudinal Records Across Multiple Care Environments In 2014 CHOC Children's created a vision for managing the health of their population. Since then they helped design tools to track chronic conditions that require little training and provide patients with a more preventative approach to care.
12:30 – 1:30 PM	Federal Health Community Lunch
	Location: TBD
1:00 – 2:00 PM	Concurrent Education Sessions:
	Location: Orange County Convention Center
	The Power of the Consumer-based Healthcare Approach The image of an impersonal healthcare delivery setting must be retired. Becoming a consumer-facing healthcare organization offers many benefits—including fostering greater patient partnerships to drive care quality and outcome improvements—but there are key challenges to overcome on the road to improvement. A panel of experts will share customer insights and provide attendees with the tools needed to become leaders in the new healthcare landscape.

OR

eCQM Readiness and Challenges: An Essential Conversation

Electronic clinical quality measures (eCQMs) hold promise for minimizing data collection and reporting burden on providers while accurately reflecting the quality of care delivered. Delivering on this vision requires multi-stakeholder involvement in the development of standards, tools, and specifications that support eCQM reporting.

OR

Electronic Consultations to Achieve the "Quadruple Aim"

Electronic consultation and referral (eCR) has improved access to specialty care, enriched primary care-specialty care provider communications, and enhanced care coordination. This session will discuss practical tools and approaches to implement and evaluate an eCR system. Participants will acquire better understanding of organization-specific adoption considerations, as well as Quadruple-Aim-focused evaluation methods for improving cost and efficiency, population health and clinical outcomes, patient experience and provider experience.

OR

YourTurn: Electronic Identification of Palliative Care Patients

Expert level palliative care management can ensure improved quality of life for patients with serious illness. It improves the quality of life for the patient along with reduced hospitalizations and total cost of care. Intermountain Healthcare developed an electronic palliative care identification algorithm which leverages historical and near real time data to early identify patients that would benefit from palliative care at the time of hospital admission.

2:30 - 3:30 PM

Concurrent Education Sessions:

Location: Orange County Convention Center

Avoiding a Sophisticated, Targeted Breach: Critical Guidance for Healthcare Organizations

Advanced Persistent Threats (APTs) are no longer reserved for highly visible corporate entities. Any organization, regardless of size, can be targeted by a sophisticated and organized attack. Today, "victims" are being chosen and the targets are patient data, research data, hospital infrastructure and more. So, how are these organizational targets being identified?

OR

Mobile Innovations and Telehealth in Emergency Care

In the world of emergency medical services (EMS), ambulances help ensure rapid treatment and transport for millions of patients across the country. The model for this care, however, has not changed substantially in decades. Significant opportunities exist for more mobile and connected solutions to radically transform the delivery of pre-hospital care, improving clinical and economic outcomes for patients and community. There are virtually no existing, comprehensive benchmarks and evidence for how EMS should deploy these concepts.

OR

Senior Care Trending: Tech Case Study for Population Health

	Six of the largest senior living companies in the United States, working with four highly innovative technology partners have teamed up to transform healthcare through IT. Leveraging wearable technology, advanced analytics, tablets and applications, use cases range from overall digital population health and wellness for mood elevation and increased mobility to identifying trending and quality of life, resident engagement and family advocacy and trust, in addition to clinician assessment and intervention and hospital readmission prevention. This study spans the continuum of care from independent living through assisted living, including memory care and skilled nursing.
4:15 – 5:30 PM	Federal Health Community Reception
	Location: TBD
	Dinner on your own

Wednesday, Fe	Wednesday, February 22, 2017		
8:30 - 9:30 AM	Concurrent Education Sessions:		
	Location: Orange County Convention Center		
	Cybersecurity: Decisions, Habits, Hygiene What do marketing, psychology, and good hygiene have to do with cybersecurity? Most incidents in the cyber domain can be traced back to human error. According to a recent study, mistakes are cited as the root cause of half of data breaches in healthcare. Understanding the choices people make and the habits they rely on will help us understand the relationship between human error and cyber incidents, and spark discussions on how we can affect sustainable changes.		
	OR		
	Benefits of Tele-ICU Management of ICU Boarders in the ED Multiple benefits have been noted by our tele-ICU program: disease management by intervening early in acute situations, supplementary rounding to realize opportunities in disease management, population management of ICU patients and gap solutions in the process of delivering evidence-based medicine to our critically ill patients. After a serious safety event of an ICU boarder, we integrated ICU telehealth into the process of providing care for the boarded ICU patient.		
	OR		
	YourTurn: The Role of Risk Assessment in Value Based Purchasing MACRA and other healthcare policy initiatives have moved the dialogue around value from the theoretical to the real. The concept of risk is becoming a key factor in most approaches to moving to a value-driven model. Risk however, means different things to different stakeholders. This discussion will focus on risk from both a clinical and financial perspective to understand how it will be measured and used to adjust for both clinical and cost outcomes in this new environment.		
9:30 AM - 4:00 PM	HIMSS17 Exhibition Hall		
	<u>Location:</u> Orange County Convention Center		
	Description: Learn about cutting edge health information technology.		
	Experience thousands of health IT products and services on the HIMSS17 exhibit		

	floor. Features the Meaningful Use Experience — a special live demonstration area that lets the viewer experience proven, certified EHR solutions. Also experience firsthand the Social Media Center, HIMSS Interoperability Showcase, The Intelligent Hospital Pavilion and much more.
9:30 AM - 4:00 PM	Interoperability Showcase
	Location: Booth 9000 Hall F
	<u>Description:</u> Explore a health ecosystem where standards-based health IT enables individuals to securely access, contribute to and analyze their own health data.
10:00 – 11:00AM	Concurrent Education Sessions:
1	Location: Orange County Convention Center
	Efforts to Assist Providers and Patients In Using Health IT for High Quality Care The concept of using health IT to provide high quality care has transitioned from vision to reality over the last few years. For nearly a decade, Office of the National Coordinator for Health Information Technology (ONC) has been working with consumer representatives, providers, and other stakeholders across the country to develop tools and resources that support their use of certified health IT to improve how care is being delivered. This session will outline ONC's tools and resources available to help providers and patients in the care delivery process, with a special focus on population & community health, workforce training, interoperability, consumer engagement, and practice transformation.
	OR
	No Patient Left Behind: Leading Transition to Modernized Capability Modernizing clinical capability and systems while meeting the current demands is a complicated process with patient safety and medical readiness risks. This session will describe the MHS approach to transitioning legacy applications to modernize systems. It will then go into the efforts and accomplishments of the transition to date and describe enterprise planning and the risks to patients. The session will end on how the health IT industry and the commercial world may apply approaches and lessons learned.
	OR
	Next-Generation IT Governance: Fully Integrated and Operationally-Led The increasingly complex nature of today's healthcare environment makes effective governance more essential than ever. Challenges raised by issues such as the extension of IT systems to community partners and increased rates of mergers and acquisitions have rendered traditional approaches to IT governance disconnected and inoperative. IS-led IT governance, still the norm in most organizations, only frustrates efforts to link committees, coordinate responsibilities and properly distribute authorities. The solution to those challenges is a holistic approach to IT governance that allows for optimization of systems and resources to ultimately improve healthcare outcomes.
	Leveraging Technology for Financial Patient Engagement Patient payment and collection practices are highly complex, and with high deductibles, patients have evolved into a primary payer source. On average, healthcare consumers are now responsible for 30% to 35% of their healthcare bill, and collection costs are significantly higher for patients as compared to payer collection. Traditional billing practices are obsolete, require analytics, and now have significant downstream debt risk. It is increasingly important to leverage predictive analytics for patient-centered financial discussions throughout the

	continuum of the Revenue Cycle.
11:30 AM — 12:30 PM	Concurrent Education Sessions:
	Location: Orange County Convention Center
	Healthcare Consumerism: Understand the Person Behind the Patient Consumers are demanding an unprecedented level of personalization in every facet of their lives. This increasing demand challenges healthcare companies to think of patients as consumers, to see the person behind the patient. This session will discuss how to leverage insights and preferences to tailor the patient experience at every touchpoint. Organizations will share how they invested in cloud, mobile, social technology to transform engagement and empower patients to take a more active role in their care.
	OR
	The CIO/CMO Relationship: Keys to Leading and Thriving During Changing Times
	As cost and quality are increasingly measured not by care episodes but by overall patient outcomes, optimizing transitions in care has become a crucial focal point for health systems. Bringing together the expertise of both inpatient and outpatient domains ensures that the insights garnered from analytics fully address the continuum of care.
	OR
	Developing Health IT Leaders: A Statewide Collaboration This session presents the results from a statewide collaboration between the Virginia Chapter of HIMSS and the four state Project Management Institute (PMI) chapters undertaken in 2015 to develop and field a cross-training program for health IT project managers and healthcare practitioners.
1:00 - 2:00 PM	Concurrent Education Sessions:
	Location: Orange County Convention Center
	RPM: Is It All It Is Cracked Up to Be? Remote Patient Monitoring (RPM) has been valued by some as a way to improve the quality and efficiency of care while improving provider and patient satisfaction. While there is general belief that these solutions enable healthcare organizations to better manage patients, does the evidence really support these conclusions? With the potential explosion of wearable devices and monitoring in real time a variety of conditions and purposes, is RPM the panacea some think it is? A national survey and case study of its use at CHRISTUS Health will shed light on these questions.
	OR
	Encore Presentation: Value-Based Care Delivery: The March to MACRA and Beyond This is a videotaped rebroadcast session. Value-based care initiatives are more important than ever before. Learn the latest insights from a variety of federal government agencies.
	OR
	IT-Enabling Population Health: A Journey, Not a Destination

Roundtable Discussion with Federal Agency Staff (CMS, ONC, DHA, among others) Location: TBD Concurrent Education Sessions: Location: Orange County Convention Center Pursuing Unlimited Mobile Opportunities with Bounded Resources The use of smartphones, tablets, wireless medical devices, mobile apps, etc., in healthcare is becoming pervasive. With so much opportunity, where does an organization begin? This presentation will look at the efforts of JFK Health System, based in NJ, which is taking a structured approach to get its arms around the mobile space. OR Portal Use Factors - The Keys to Patient Portal Adoption There is a premise that patient portals facilitate increased patient engagement. However, despite federal initiatives to promote the provision and use of patient portals, their overall adoption and use have been less than desired. Studies have identified various factors that affect patient portal adoption and use. This session will examine such specific factors and, through active audience participation, seek to identify practical interventions targeted at improving the use of patient portals. OR State Medicaid Agency Interoperability States' IT systems are critical for successful operation of Medicaid, the nation's largest public health insurance program. Increasingly, modular and interoperable Medicaid IT systems are becoming vital for promoting health outcomes of Medicaid beneficiaries and for reducing Medicaid program costs. While CMS, ONC and other federal agencies have issued guidance for interoperability in Medicaid, there still exists great opportunities for enhancements that are critical to achieving a true national, interoperable Medicaid. This session will discuss the critical areas of interoperability, how further guidance from HHS agencies can accelerate Medicaid Interoperability by states and how health information exchanges (HIEs) can be leveraged.		Providence Health & Services (PH&S) created the Population Health (PH) division in recognition of the growing percentage of its revenue tied to at-risk contracts for defined populations of patients. Within the PH division, the Office of Population Health Informatics (OPHI) was created to manage population health data coordination, quality measurement, advanced analytics, predictive modeling and IT collaboration. The OPHI also optimizes the ability of Providence's HIT applications to support population health management. OR YourTurn: Cybersecurity Challenges in Health Care Evolving cyber threats are requiring operations and security staff to rapidly adapt and respond. One way for a hospital to improve its response agility is by implementing cyber threat intelligence (CTI) information sharing programs. These programs rely on a network of other organizations with similar profiles to share data to better understand malicious actors. The talk, led by the NCCoE at the NIST, will explore best practices and guidelines.
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5:00 – 6:00 PM Education Social Hour		States' IT systems are critical for successful operation of Medicaid, the nation's largest public health insurance program. Increasingly, modular and interoperable Medicaid IT systems are becoming vital for promoting health outcomes of Medicaid beneficiaries and for reducing Medicaid program costs. While CMS, ONC and other federal agencies have issued guidance for interoperability in Medicaid, there still exists great opportunities for enhancements that are critical to achieving a true national, interoperable Medicaid. This session will discuss the critical areas of interoperability, how further guidance from HHS agencies can accelerate Medicaid Interoperability by states and how health information
	5:00 – 6:00 PM	Education Social Hour

	Location: TBD	
	Dinner on your own	
Travel to W	/ashington, DC	

Thursday, February 23, 2017

Thursday, February 23, 2017		
8:30 – 10:00 AM	Morning Keynote: Political Perspectives on America's Future Featuring Speaker John Boehner	
	Location: Valencia Ballroom	
10:30 – 11:30 AM	Concurrent Education Sessions:	
	Location: Orange County Convention Center	
	Interoperability Matters: Impact on Mammography Outcomes While CIOs often hear about how better health data interoperability will improve outcomes and overall quality of care, the benefits are often stated as vague theoretical. A use case for interoperability directly improving care quality lies in mammographycloud-based mammogram image exchange networks provide secure, patient-portable accessibility of prior exams for more accurate interpretation of exams and improved patient outcomes at reduced costs. With increased availability of prior exams, which are essential for accurate interpretation of new mammograms because each patient's breast tissue is unique, quality of patient care and outcomes are improved, along with patient satisfaction. This interactive, educational session will share an interoperability use case in mammography, discuss how this model can be applied to other imaging-intensive specialties and how to develop enterprise-friendly medical image-sharing implementations that will pay dividends for patient outcomes.	
12:00 – 1:00 PM	Concurrent Education Sessions:	
	<u>Location:</u> Orange County Convention Center	
	What's All the Fuss About Bundled Payments? Bundled Payment Care Improvement (BPCI), a key component of the value-based payment programs proposed in the Affordable Care Act of 2010, is proving to be a viable methodology for providing high quality patient care at a more affordable price. CMMI (Centers for Medicare and Medicaid Innovation) is two-plus years into piloting the four models proposed within BPCI. CMS has already implemented one mandatory five-year bundle - total joint arthroplasty - in many areas of the country and more are expected. This important work cannot be accomplished without significant collaboration between clinicians and the IT/EHR teams.	
	OR	
	MACRA Prep in Underserved Populations with Data-Centric HIE With MACRA on the horizon, many providers are just beginning to understand the implications of this new payment paradigm. For large health systems and metropolitan networks, the transition will be enabled by ample financial, IT and educational resources. But, for rural and urban health providers serving medically underserved populations, the road looks more foreboding, complicated by smaller budgets and the lack of resources and IT expertise needed to make the transition. However, GA-HITEC, the rural HIE serving over 4000 rural PCPs and 56 critical access and rural hospitals in Georgia, is already developing innovative plans to	

	ease the transition, serving as a model of excellence for aiding small, independent practitioners in rural areas. This session will discuss how implementing a datacentric approach to rural HIE development, backed with education and technical support, can streamline the MACRA transition.
1:15 — 2:30PM	Closing Keynote: Kevin O'Leary and Robert Herjavec, Stars of ABC's "Shark Tank" Location: Valencia Ballroom
3:00 – 4:30 PM	Roundtable with HIMSS Executive Leadership Location: TBD
5:00 PM Alternative Trave	Dinner on your own

Additional Information

6. Departure and Arrival Information

HIMSS17 Annual Conference runs from February 19 - 23rd, 2017 and Congressional staff arrival and departure dates will vary. HIMSS is offering up to three nights of lodging and food to participating staff, which will be on various days throughout the conference.

4. List of Congressional Invites

Each congressional invitee plays a key role in developing healthcare and health IT policy in the House of Representatives, and will benefit greatly from the educational sessions and speakers presenting at HIMSS17. The conference will further provide invitees the opportunity to interact with, and learn about, real-world applications of healthcare technology, and learn how policy impacts the effective use of these technologies to improve care and access, and lower healthcare costs.

House of Representatives Invitees:

- Casey Badmington (Rep. Thompson)
- Walton Chaney (Rep. Harper)
- Elise Conner (Rep. Johnson)
- Elizabeth Decker (Rep. Titus)
- Carla DiBlasio (Rep. Price)
- Scott Dziengelski (Rep. Murphy)
- Matt Gallivan (Rep. Paulsen)
- Andrew Gradison (Rep. Smith)
- Matt Haskins (Rep. Hurd)
- Andrew Lachman (Rep. Lieu)
- Sarah Levin (Ways & Means Committee)
- Isaac Loeb (Rep. Welch)
- Katie Mitchell (Rep. Black)
- James Paluskiewicz (Energy & Commerce Committee)
- Olivia Pham (Energy & Commerce Committee)
- Rachel Schwegman (Rep. Latta)
- Jordan See (Rep. Carter)
- Danielle Steele (Rep. Burgess)
- Megan Herber (Rep. Matsui)
- Kristi Thompson (Rep. Blackburn)
- Nick Uehlecke (Ways & Means Committee)
- Jessica Wilkerson (Energy & Commerce Committee)
- Arielle Woronoff (Energy & Commerce Committee)